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49637 7590 1001/2008 BERRY & ASSOCIATES P.C. 9255 SUNSET BOULEVARD SUITE 810				Certificate of Mailing or Transmission  I hereby certify that this Pec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-285, on the date indicated below.			
LOS ANGELES	S, CA 90069			Reena Kuyper			(Depositor's name)
				/Reena Kuyper/			(Signature)
			Ĺ	January 2, 200	9		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	OR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
09/874,717	09/874,717 06/04/2001		Roger Flores	PALM-3643 . US . P		6235	
		ECTION AND UPDATE	1				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$0		01/02/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
MEINECKE DIA		3692	705-010000				
"Fee Address" ind PTO/SB/47; Rev 03-6 Number is required.	ondence address (or Cha B/122) attached. ication (or "Fee Address 22 or more recent) attach	Indication form acd. Use of a Customer	2. For printing on the pattent front page, list (1) the names of up to 3 registered pattent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a negistered attorney or agent) and the names of up to 2 registered pattent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patient. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  PalmSource, Inc.  Sunnyvale, California							
Please check the appropr	iate assignee category or	categories (will not be p	rinted on the patent):	🗆 Individual 🗷 C	orporati	on or other private gro	up entity Government
4a. The following fee(s)  ■ Issue Fee  □ Publication Fee (N  ■ Advance Order - 1	lo small entity discount p # of Copies6	A. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)     A check is enclosed.     A check is enclosed.     Payment by credit eard, Form PTO-2038 is attached.     The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any nevery annual, to Depoid Accessib Number00.4102					
a. Applicant claim	s SMALL ENTITY state	is. See 37 CFR 1.27.	☐ b. Applicant is no l				
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